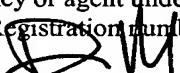




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|--|---|---------------------------------------|--|---|----------|--|------------------|--|----------|---|----------|--|----------|--|--|--|-----------------------------|---|--|--|--|--|--|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) 740172-22 | | | | | | | | | | | | | | | | | | | | | |
| <p>CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at (571) 273-8300, on August 11, 2006.</p> <p>Signature: _____</p> <p>Name: _____</p> | In re Application of Rodney KIELT, et al. | | | | | | | | | | | | | | | | | | | | | | |
| | Application Number 10/501,519 For ORTHOTIC INSERT AND METHOD OF MANUFACTURE THEREOF | Filed 12/28/2004 | | | | | | | | | | | | | | | | | | | | | |
| | Group Art Unit 3728 | Examiner Marie D. Patterson | | | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <table> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)</td> <td>\$ <u>460.00</u></td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Applicant claims small entity status.</td> <td>10/22/2007 SSANDARI 00000016 192380 10501519</td> </tr> <tr> <td><input type="checkbox"/> A check to cover the fee is enclosed.</td> <td>01 FC:1252 <u>460.00 DA</u></td> </tr> <tr> <td><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> I have enclosed a duplicate copy of this sheet.</td> <td></td> </tr> </tbody> </table> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <ul style="list-style-type: none"> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>47,362</u> <p> _____ Signature</p> <p>_____ October 12, 2007 Date</p> <p>_____ David B. Hardy, Reg. No. 47,362 Typed or printed name</p> <p>_____ (202) 585-8000 Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p> | | | | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) | \$ _____ | <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460) | \$ <u>460.00</u> | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050) | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640) | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230) | \$ _____ | <input type="checkbox"/> Applicant claims small entity status. | 10/22/2007 SSANDARI 00000016 192380 10501519 | <input type="checkbox"/> A check to cover the fee is enclosed. | 01 FC:1252 <u>460.00 DA</u> | <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> I have enclosed a duplicate copy of this sheet. | |
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